

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State  
Received and Filed

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Michael G. Adams  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

Certificate of Authority

FBE

Pursuant to the provisions of KRS 14A.9 - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements.

1. The business entity is a **profit corporation**.
2. The name of the entity is: **FULL OUT COMBAT CHEER, INC**
3. The name of the entity to be used in Kentucky is (if applicable): **N/A**
4. The state or country whose law the entity is organized is **Washington**.
5. The date of organization is **9/1/2022** and the period of duration is **perpetual**.

**7. Principal Office**

18309 B St E  
Spanaway, WA 98387

**8. Required Representatives**

<b>Director</b>	Sabrina Renee Lopez	18309 B St E	Spanaway	WA	98387
<b>Officer</b>	Clinton Jess Lopez	18309 B St E	Spanaway	WA	98387

**9. Registered Agent/Office**

Troy A Keller  
1621 Hunnington Place #6  
Louisville, KY 40220

I, **Troy A Keller**, consent to serve as the **Registered Agent** on behalf of this Entity.  
on Sunday, February 26, 2023

As the Authorized Representative, I, **Sabrina Lopez**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Vice President**